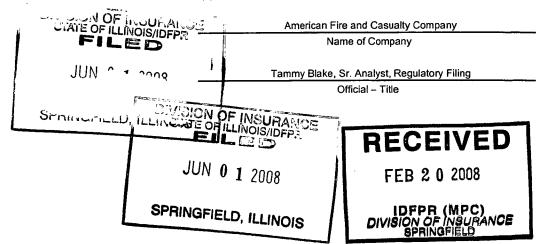
	(1)	(2)	(3)
	(1)	Annual Premium	Percent
	<u>Coverage</u>	Volume (Illinois)*	<u>Change (+ or -)**</u>
	Automobile Liability Private		
	Passenger Commercial		
,	Automobile Physical Damage Private Passenger Commercial		
	Liability Other Than Auto		
	Burglary and Theft		
	Glass	1.00	
	Fidelity		
	Surety		
	Boiler and Machinery		
	Fire		
).	Extended Coverage		
١.	Inland Marine		
2.	Homeowners		
3.	Commercial Multi-Peril		
4.	Crop Hail		
5.	Other Workers Compensation	\$768,029	2.6%
	Line of Insurance		
ОЕ	es filing only apply to certain territory (terri	tories) or certain classes? If so, specify.	
rie	f description of filing. (If filing follows rates	s of an advisory organization, specify orga	anization): NCCI
		or arraditionly organization, opposity organization	
lea	se refer to the enclosed Actuarial Memorandum.		

<sup>\*\*</sup>Change in Company's premium level which will result from application of new rates.



<sup>\*</sup>Adjusted to reflect all prior rate changes.

# ILLINOIS DEPARTMENT OF INSURANCE SUMMARY SHEET

Change in Company's premium or rate leve	I produced by rate revision effective	May 1, 2008
(1)	(2) Annual Premium INSURANCE DIVINOR INSURANCE	(3) Percent
<u>Coverage</u>	Volume Hitimols LLINOIS/IDFPR	<u>Change (+ or -)**</u>
Automobile Liability Private     Passenger Commercial     Automobile Physical Damage     Private Passenger Commercial	MAY 0 1 2008	
3. Liability Other Than Auto  4. Burglary and Theft	SPRINGFIELD, ILLINOIS	
5. Glass 6. Fidelity		
7. Surety B. Boiler and Machinery		
9. Fire 10. Extended Coverage 11. Inland Marine		
12. Homeowners 13. Commercial Multi-Peril 14. Crop Hail		
15. Other Workers Compensation	4,645,811	+6.0
Does filing only apply to certain territory (ter	rritories) or certain classes? If so, specify: <u>no</u>	
business effective May 1, 2008, adopt NC	rates of an advisory organization, specify or CI rates announced in Circular IL-2007-05 a WC-MV-AIC Ed 05/08, which will replace page	and approved in IL-2007-08. Also
*Adjusted to reflect all prior rate changes. **Change in Company's premium level whic	ch will result from application of new rates.	
		nsurance Company e of Company
		Compliance Analyst I

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IDFPR (MPC) Division of Insurance Springfield

Change in Company's premium or rate le	evel produced by rate revision effective	May 1, 2008
(1) Coverage	(2) Annual Premium <u>Volume (Illinois)*</u>	(3) Percent <u>Change (+ or -)**</u>
Automobile Liability Private     Passenger Commercial		
2. Automobile Physical Damage		
Private Passenger Commercial		
3. Liability Other Than Auto		
Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
B. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other Workers Compensation	8,712,977	<u>+6.3</u>
Line of Insurance		
ousiness effective May 1, 2008, adopt	vs rates of an advisory organization, sp NCCI rates announced in Circular IL-20 IL-WC-MV-AMI Ed 05/08, which will rep	pecify organization): <u>For new and renewal</u> 007-05 and approved in IL-2007-08. Also place page IL-WC-AMI Ed 07/05.
*Adjusted to reflect all prior rate changes **Change in Company's premium level v	which will result from application of new	
	Amens	ure Mutual Insurance Company Name of Company
	Tracv	Upcott - Compliance Analyst I
	F INSURANCE LLINOIS/IDFPR ED	Official – Title
MAY 0	1 2008	RECEIVED
SPRINGFIEL	D, ILLINOIS	* FEB - 8 2008

	Change in Company's premium or rate level p	produced by rate revision effective	7/1/08
	(1)	(2) Annual Premium	(3) Percent
	Coverage	Volume (Illinois)*	Change (+ or -)**
	Automobile Liability		
	Private Passenger  Commercial		
•	Automobile Physical Damage Private Passenger Commercial		
i.	Liability Other Than Auto		
	Burglary and Theft		
	Glass		
	Fidelity		
	Surety		
	Boiler and Machinery		
	Fire		
0.	Extended Coverage		
1.	Inland Marine		
2.	Homeowners		
3.	Commercial Multi-Peril		
4.	Crop Hail		
5.	Other Workers Compensation	\$1,115,866	-9.76%
	Line of Insurance		
)oe	s filing only apply to certain territory (territories	) or certain classes? If so, specify	No
- - نــ د	following of films (If films follows water of a	an advisory arganization, aposity arga	nization):
srie	f description of filing. (If filing follows rates of a		nization):
	Revised company Loss Cost Modifier from 1.	64 to 1.48.	
	Supercets last Filing		

\* Adjust to reflect all prior rate changes.

\*\* Change in Company's premium level which will result from application of new rates.



COLUMBIA NATIONAL INS. CO.

Name of Company

Dennis McVay, CPCU
Director, Research & Development
Official - Title

#### **SUMMARY SHEET**

Change in Company's premium or rate level produced by rate Revision effective  $\underline{7/1/2008}$ 

		(1)	(2) Annual Premium	(3) Percent
		Coverage	Volume (Illinois)*	<u>Change (+ or -)**</u>
1.		oile Liability Passenger		
2.	Automob	oile Physical Damage Passenger		
3.	-	Other Than Auto		
4.		and Theft		
5.	Glass			
6.	Fidelity			
7.	Surety			
8.		d Machinery		
9.	Fire			
10.		l Coverage	·	
11.	Inland M	arine		
12.	Homeow			
13.	Commer	cial Multi-Peril		
14.	Crop Hai			
15.	Other	WC	<b>\$,3797,892.</b>	-5.49%
		Line of Insurance		
Does No	filing only	apply to certain territory	(territories) or certain classes? If	so, specify:
Ado	pting NC	CI loss costs and Rating	ws rates of an advisory Organizati Value Revision subject to specifi	on, specify organization): ied deviated class codes
date	d effective	e January 1, 2008.		
	<del></del>			
* A	diusted to	reflect all prior rate change	ges.	
			which will result from application	of new rates.

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H29210D

Continental Western Insurance Company

Name of Company

Sharon Winter, Statistical & Research Analyst

Official - Title

orm=	(RF-3)	SUMMARY SHEET	RECEIVED
	Change in Company's pr	emium or rate level produced by	v rate ∖
	revision effective May 1,	2008	IDFPR (MPC) Division of insuranc Springfield
	(1)	(2)	(3)
	Coverage	Annual Premium Volume (Illinois) *	Percent Change (+ or -) **
1.	Automobile Liability Private Passenger		
2.	Commercial Automobile Physical Damage Private Passenger		
	Commercial		
3.	Liability Other Than Auto		
4.	Burglary and Thet STATE OF ILL	INSURANCE INCIS/IDEPR	
5.	Glass		
6.	Fidelity MAY 0	1 2008	
7.	Surety		
8.	Boiler and Machinery SPRINGFIEL	D II INDIE	
9.	Fire	S, ILLINOIS	
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other Workers' Compensation	15,532,386	11.9%
Doe <u>No</u>	Line of Insurance es filing only apply to certain territory	(territories) or certain classes? If so	o, specify:

Brief description of filing. (If filing follows rates of an advisory organization, specify organization):

We are revising our multiplier and deviations on some class codes. The impact is +11.9% change in our premium level.

\* Adjusted to reflect all prior rate changes.

Federated Mutual Ins. Co.

Name of Company

Greg Bangs ACAS, MAAA – Assoc. Actuary

Official – Title

<sup>\*\*</sup> Change in Company's premium level which will result from application of new rates.

#### SUMMARY SHEET

Change in Company's premium or rate level produced by rate

revision effective May 1, 2008

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IDFPR (MPC) DIVISION OF INSURANCE SPRINGFIELD

	(1)	(2) Annual Premium	(3) Percent
	Coverage	Volume (Illinois) *	Change (+ or -) **
1.	Automobile Liability Private Passenger		
2.	Commercial Automobile Physical Damage Private Passenger		
	Commercial		
3.	Liability Other Than Auto	NCE -	
4.	Burglary and Theft OF INSURA Glass Fidelity  A 200	PR	
5.	Glass STATE I		
6.	Fidelity Surety  MAY 0 1 200	8 8	
7.	Surety MAI		
8.	Boiler and Machinery Fire SPRINGFIELD, IL	LINOIS	
9.	Fire SPRINGF I		
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other Workers' Compensation	400,948	10.2%
	Line of Insurance		
Doe N	es filing only apply to certain territory (to	erritories) or certain classes? If s	o, specify:
<u></u>	of description of filing. (If filing follows reference of the revising our multiplier and deviation our premium level.		
	•		
** C	Adjusted to reflect all prior rate char change in Company's premium level wi vill result from application of new rates.	hich	
	• •	F	ederated Service Ins. Co.
			e of Company S. MAAA – Assoc. Actuary

Official - Title

	DIVISO	FILLINGISIDANCE
	<i>[</i>	1 4 7000 l
Form (RF-3)	SUMMARY SHEET SPRINGFIEL um or rate level produced by	D. u
Change in Company's premi revision effective May 1,		Tate
(1)	(2)	(3) Percent
Coverage	Annual Premium Volume (Illinois)*	Change (+ or -) **
1. Automobile Liability Private Passenger Commercial 2. Automobile Physical Damage Private Passenger Commercial 3. Liability Other Than Auto 4. Burglary and Theft 5. Glass 6. Fidelity 7. Surety 8. Boiler and Machinery 9. Fire 10. Extended Coverage 11. Inland Marine 12. Homeowners 13. Commercial Multi-Peril		
14. Crop Hail 15. Other Workers Compensation Line of Insurance	11,022,126	+6.5%
Does filing only apply to certain If so, specify: No	n territory (territories)or	certain classes?
Brief description of filing. (I organization, specify organizati	f filing follows rates of an on): Adoption of NCCI loss	advisory costs and rating
values per NCCI Circular IL-2007	-08 for new and renewal busi	ness_effective
May 1, 2008. An LCM of 1.569 wi	ll be used to determine fina	l rates.
* Adjusted to reflect all prior  ** Change in Company's premium long result from application of new	evel which will	nce Company
	Name of Company	
	Karen Bethea - Actu Official - Titl	nary .e

H29219D

### **ILLINOIS DEPARTMENT OF INSURANCE SUMMARY SHEET**

Char	nge in Company's premium or rate lev	rel produced by rate revision effective	05-15-2008 N & R
	(1)	(2) Annual Premium	(3) Percent
	<u>Coverage</u>	Volume (Illinois)*	<u>Change (+ or -)**</u>
1.	Automobile Liability Private		
_	Passenger Commercial		
2.	Automobile Physical Damage Private Passenger Commercial		
3.	Liability Other Than Auto		
	Burglary and Theft		
	Glass		
	Fidelity		
	Surety		
	Boiler and Machinery		
	Fire		
	Extended Coverage		
	Inland Marine		
	Homeowners		
	Commercial Multi-Peril		•
	Crop Hail		
	Other 16.0 Workers' Compensation	55,611	±€% -0.4
	Line of Insurance		
Does	s filing only apply to certain territory (to	erritories) or certain classes? If so, specify:	NO
		ates of an advisory organization, specify orga \$160. No other changes will be made with this filing.	anization):
	usted to reflect all prior rate changes. ange in Company's premium level wh	ich will result from application of new rates.	
		GuideOne Elite Insurance Com	nany
			ne of Company
		Scott Reddig, Chief Actuary & S	SVP
			Official - Title
		DIVISI	ON OF INSURANCE

STATE OF ILLINOIS/IDEPR

MAY 1 5 2008

SPRINGFIELD, ILLINOIS

	rel produced by rate revision effective	5/15/2008 N & R
(1) <u>Coverage</u>	(2) Annual Premium <u>Volume (Illinois)*</u>	(3) Percent Change (+ or -)**
<ol> <li>Automobile Liability Private         Passenger Commercial</li> <li>Automobile Physical Damage         Private Passenger Commercial</li> <li>Liability Other Than Auto</li> <li>Burglary and Theft</li> <li>Glass</li> <li>Fidelity</li> <li>Surety</li> <li>Boiler and Machinery</li> <li>Fire</li> <li>Extended Coverage</li> <li>Inland Marine</li> <li>Homeowners</li> <li>Commercial Multi-Peril</li> </ol>		
14. Crop Hail		
15. Other 16.0 Workers' Compensation Line of Insurance	1,328,110	0.4
Does filing only apply to certain territory (to Brief description of filing. (If filing follows r	erritories) or certain classes? If so, specify:attes of an advisory organization, specify organiz	NO
We are revising Expense Constant only, from \$260 to	\$160. No other changes will be made with this filing.	
*Adjusted to reflect all prior rate changes. **Change in Company's premium level where the change is the company's premium level where the change is the change is the change in the cha	sich will result from application of new rates	

DIVISION OF INSUPANCE STATE OF ILLINOIS/IDEPR

2008 ن آ انال

**SUMMARY SHEET** 

IDFPR (MPC) DIVISION OF INSURANCE SPRINGFIELD

Form (RF-3)

Change in Company's premium or rate level profile ed by rate revision effective 6-15-08 NB & 9-15-08 REN

	(1) <u>Coverage</u>	(2) Annual Premiun Volume (Illinois)		(3) Percent Change (+ or -)**
1.	Automobile Liability			
	Private Passenger		<del></del>	
	Commercial			
2.	Automobile Physical Damage			
	Private Passenger		<del></del>	
	Commercial			
3.	Liability Other Than Auto			
4.	Burglary and Theft			
5.	Glass			
6.	Fidelity			
7.	Surety			
8.	Boiler and Machinery			
9.	Fire			
10.	Extended Coverage	<u> </u>		
11.	Inland Marine			
12.	Homeowners			
13.	Commercial Multi-Peril			
14.	Crop Hail			21.20
15.	Other Workers Compensation	\$117,462	<u> </u>	21.3%
	Line of Insurance			
Ooes f Revi	filing only apply to certain territory (tersed LCMs for all classes to a uniform I	ritories) or certain classes .963.	? If so, specify:	
Brief ( Revi	description of filing. (If filing follows sed loss cost multipliers. See rate page	rates of an advisory organ	STATE OF ILLING	JIS/IDFPH
			FILE	المساحة
** C	djusted to reflect all prior rate changes. hange in Company's premium level whe sult from application of new rates.	ich will	JUN 1 5	2008
			SPRINGFIELD	synte insurance Company
		<u></u>	Harley	Name of Company
				maine of Company

Eileen Fisher

Senior State Filings Analyst

Official - Title

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Official - Title

Form (RF-3)

SUMMARY SHEET

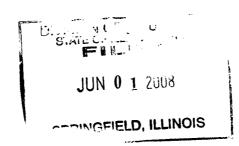
DIVISION OF INSUITANCE SPRINGERY

Changa in (	'omnany's premium or rate l	evel produced by rate revision effect	ive 6-15-08 NB & 9-15-08 REN
Change in C	(1)	(2) Annual Premium	(3) Percent
	Coverage	Volume (Illinois)*	<u>Change (+ or -)**</u>
	pile Liability Passenger		
2. Automol	oile Physical Damage Passenger		
	Other Than Auto		
	and Theft		
5. Glass	and There		
6. Fidelity			
-			
7. Surety	nd Machinery		
8. Boiler a 9. Fire	nd Wachinery		
	d Coverage		
		The state of the s	
	rcial Multi-Peril		
<ul><li>14. Crop Ha</li><li>15. Other</li></ul>	Workers Compensation	\$5,220,240	-3.8%
15. Other	Line of Insurance	Ψ0,520,210	
Does filing only	apply to certain territory (ter	ritories) or certain classes? If so, spe	ecify:
Revised LCMs	for all classes to a uniform 1	.570.	
Brief description	of filing. (If filing follows	rates of an advisory organization, spe	ecify organization):
Davised loss co	set multipliers. See rate page	es for details.	
* Adjusted to  ** Change in (	reflect all prior rate changes Company's premium level wh application of new rates.	NIGHON OF INSURANCE	
		MN I P 5008	Harleysville Lake States Insurance Company
		SPRINGFIELD, ILLINOIS	Name of Company
			Eileen Fisher
			Eileen Fisher Senior State Filings Analyst

. .

### ILLINOIS DEPARTMENT OF INSURANCE SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective		6/1/2008 NB & RB		
(1) <u>Coverage</u>	(2) Annual Premium <u>Volume (Illinois)*</u>	(3) Percent <u>Change (+ or -)**</u>		
1. Automobile Liability Private				
Passenger Commercial  2. Automobile Physical Damage Private Passenger Commercial				
<ol> <li>Liability Other Than Auto</li> <li>Burglary and Theft</li> </ol>				
5. Glass				
<ul><li>6. Fidelity</li><li>7. Surety</li></ul>	•			
Boiler and Machinery     Fire				
10. Extended Coverage				
11. Inland Marine				
12. Homeowners				
13. Commercial Multi-Peril				
14. Crop Hail	M4 500 200	1.6%		
15. Other Workers Compensation  Line of Insurance	\$4,593,206	1.0 76		
Does filing only apply to certain territory (territories) or certain classes? If so, specify:				
Brief description of filing. (If filing follows rates of an advisory organization, specify organization):  NCCI  Please refer to the enclosed Actuarial Memorandum.				
*Adjusted to reflect all prior rate changes.  **Change in Company's premium level which will result from application of new rates.				
The Ohio Occupits Income Comment				
	Ine Onio	Casualty Insurance Company  Name of Company		
	Tammy Blake, Sr. Analyst, Regulatory Filing			
		Official – Title		

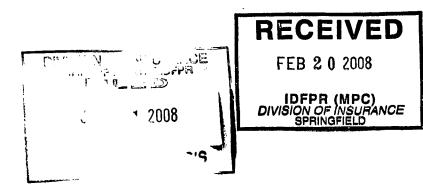


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IDFPR (MPC) Division of Insurance Springfield

Change in Company's premium or rate level produced by rate revision effective 6/1/2008 NB & RB				
	(1) <u>Coverage</u>	(2) VISION OF INSURANCE Annual Premitimof ILLINOIS/IDFPR Volume (Illinois)	(3) Percent Change (+ or -)**	
1.	Automobile Liability Private Passenger Commercial	JUN 0 1 2008		
2.	Automobile Physical Damage Private Passenger Commercial	SPRINGFIELD, ILLINOIS		
3.	Liability Other Than Auto			
4.	Burglary and Theft			
5.	Glass			
6.	Fidelity			
7.	Surety			
8.	Boiler and Machinery			
9.	Fire			
10.	Extended Coverage			
11.	Inland Marine			
12.	Homeowners			
13.	Commercial Multi-Peril			
14.	Crop Hail			
15.	Other Workers Compensation	\$955,834	3.1%	
	Line of Insurance			
Does filing only apply to certain territory (territories) or certain classes? If so, specify:  Brief description of filing. (If filing follows rates of an advisory organization, specify organization):  NCCI  Please refer to the enclosed Actuarial Memorandum.				
	justed to reflect all prior rate changes. hange in Company's premium level wl	hich will result from application of new rates.		
	The Ohio Security Insurance Company			
		Name of Co	ompany	
	Tammy Blake, Sr. Analyst, Regulatory Filing			
		Official –		



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Form (RF-3)

#### SUMMARY SHEET

Change in Company's premium revision effective 6/1/200	n or rate level pro 8	duced by rate
(1)	(2) Annual Premium	(3) Percent
Coverage	Volume (Illinois)	)* Change (+ or -)**
1. Automobile Liability Private Passenger Commercial 2. Automobile Physical Damage Private Passenger		
Commercial	10.00 p. n. n.	
3. Liability Other Than Auto		
4. Burglary and Theft	<del></del>	
5. Glass 6. Fidelity	- Davis and a state of the stat	
7. Surety		
8. Boiler and Machinery	***************************************	
9. Fire		
10. Extended Coverage		
11. Inland Marine	***************************************	
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other Workers Compensation Line of Insurance	25,623,	800 +7.9%
Does filing only apply to certain  If so, specify: No  Brief description of filing. (If	-	
organization, specify organization		es of an advisory
1/1/2008 Advisory Rates with class	deviations and a	flanced in
the attachment.		FILED
		0 1 7000
* Adjusted to reflect all prior rate changes.  ** Change in Company's premium level which will result from application of new rates.		JUN 0 1 2008
		SPRINGFIELD, ILLINOIS
	Sentry Insurance	a Mutual Company
	Name of	Company
Jane	l Danczyk, Compliance	e/Development Analyst
		l - Title
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IDFPR (MPC) Division of Insurance Springfield

Form (RF-3)

#### SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective  $\frac{6}{1}/2008$ .

_ ·( <u>-</u> L)	( <u>Z</u> )	(3)
	Annual Premium	Percent
Coverage	Volume (Illinois)*	Change (+ or -)**
1 Nutamahila Tishilita	·	
1. Automobile Liability		
Private Passenger		
Commercial		
2. Automobile Physical Damage		
Private Passenger	-	
Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		-94-
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		-
13. Commercial Multi-Peril		
14. Crop Hail	4 242 050	
15. Other Workers Compensation	4,343,058	+6.0%
Line of Insurance		
Does filing only apply to certain If so, specify: No		
Brief description of filing. (If organization, specify organization)	n): NCCI	
1/1/2008 Advisory Rates with clas	s deviations and a flat de	eviation as listed on
the attachment.	Г	DIVISION OF INSURANCE
		STATE OF ILLINOIS/IDEPR
# 7 dd		FILED
* Adjusted to reflect all prior:		
** Change in Company's premium le		JUN 0 1 2008
result from application of new	rates.	2011 0 I 5000
	i	SPRINGFIELD, ILLINOIS
	Control Coloct Income	
	Sentry Select Insura	
	Name of Compa	пУ
	Tanol Dangguk Compliance (De-	rolonmont Anal+
	Janel Danczyk, Compliance/Dev Official - Ti	retophent Analyst
#29219D	OILICIAL - II	rT <u>e</u>

#### **SUMMARY SHEET**

Change in Company's premium or rate level produced by rate revision effective			1/1/08
	(1)	(2) Annual Premium	(3) Percent
	<u>Coverage</u>	Volume (Illinois)*	<u>Change (+ or -)**</u>
1.	Automobile Liability		
	Private Passenger		
	Commercial		
2.	Automobile Physical Damage Private Passenger		
	Commercial		
3.	Liability Other Than Auto		
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other Workers Compensation Line of Insurance	\$13,750,000	+5.83%
Does f	iling only apply to certain territory (ter	ritories) or certain classes? If so, specify	<i>/</i> :
Brief o	description of filing. (If filing follows ation of NCCI Voluntary Advisory Rat	rates of an advisory organization, specify es effective 1/1/08.	organization):
			DIVISION OF INSURANCE
			STATE OF ILLINOIS/IDFPR
* A	djusted to reflect all prior rate changes.	- 1	FILED
	hange in Company's premium level wh		
	sult from application of new rates.		JAN 0 1 2008
	·	<u> </u>	
		L.	SPRINGFIELD, ILLINOIS
		Soci	cty insurance
			Name of Company

### ILLINOIS DEPARTMENT OF INSURANCE SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 6/1/2008 NB & RB				
	(1)	(2) Si Annual Premium	SION OF INSURAL TATE OF ILLINOIS/IDFF	Rercent
	Coverage	<u>Volume (Illinois)*</u>	JUN 0 1 2008	<u>Change (+ or -)**</u>
Pass 2. Automob Priva 3. Liability 4. Burglary 5. Glass 6. Fidelity 7. Surety 8. Boiler ar 9. Fire 10. Extende 11. Inland M 12. Homeow 13. Commer 14. Crop Ha	larine /ners rcial Multi-Peril	\$4,743,484	PRINGFIELD, ILLIN	2.3%
Line of Insurance  Does filing only apply to certain territory (territories) or certain classes? If so, specify:				
•	tion of filing. (If filing follows rate ne enclosed Actuarial Memorandum.	es of an advisory organization	n, specify organizati	ion): NCCI
*Adjusted to reflect all prior rate changes.  **Change in Company's premium level which will result from application of new rates.				
	West American Insurance Company Name of Company			
			Tammy Blake, Sr. Anal	•
			Official	Title

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